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UTILITY**PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

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APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

- | | |
|--|---|
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)
<i>(Submit an original and a duplicate for fee processing)</i> | [Total Pages] <input type="text" value="33"/> |
| 2. <input type="checkbox"/> Applicant claims small entity status.
See 37 CFR 1.27. | |
| 3. <input checked="" type="checkbox"/> Specification
<i>(preferred arrangement set forth below)</i> | |
| <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure | |
| 4. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) | [Total Sheets] <input type="text" value=""/> |
| 5. Oath or Declaration | [Total Sheets] <input type="text" value="2"/> |
| a. <input checked="" type="checkbox"/> Newly executed (original or copy) | |
| b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d))
<i>(for continuation/divisional with Box 18 completed)</i> | |
| i. <input type="checkbox"/> DELETION OF INVENTOR(S)
<i>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</i> | |
| 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 | |

ADDRESS TO:Commissioner for Patents
Mail Stop Patent Application P.O. Box 1450
Alexandria VA 22314-1450

- | |
|---|
| 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) |
| 8. Nucleotide and/or Amino Acid Sequence Submission
<i>(if applicable, all necessary)</i> |
| a. <input type="checkbox"/> Computer Readable Form (CRF) |
| b. Specification Sequence Listing on: |
| i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or |
| ii. <input type="checkbox"/> paper |
| c. <input type="checkbox"/> Statements verifying identity of above copies |

ACCOMPANYING APPLICATION PARTS

- | |
|---|
| 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) |
| 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney
<i>(when there is an assignee)</i> |
| 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> |
| 12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations |
| 13. <input type="checkbox"/> Preliminary Amendment |
| 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)
<i>(Should be specifically itemized)</i> |
| 15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s)
<i>(if foreign priority is claimed)</i> |
| 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. |
| 17. <input checked="" type="checkbox"/> Other: <i>Limited Recognition Form</i> |

18 If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-in-part (CIP) of prior application No.: _____

Prior application information: Examiner _____ Group Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS
 Customer Number or Bar Code Label (insert Customer No. or Attach bar code label here) or Correspondence address below

Name	ProPat, L.L.C.				
Address	2912 Crosby Road				
City	Charlotte	State	North Carolina	Zip Code	28211-2815
Country	USA	Telephone	(704) 365-4881	Fax	(704) 365-4851
Name (Print/type)	Klaus Schweitzer	Registration No. (Attorney/Agent)	Limited Recognition		
Signature			Date	July 14, 2003	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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07/14/03

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FEE TRANSMITTAL for FY 2002

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant Claims small entity status. See 37 CFR 1.27
TOTAL AMOUNT OF PAYMENT (\$) **790.00**

Complete if Known	
Application Number	
Filing Date	
First Named Inventor	Roland FEOLA
Examiner Name	
Group Art Unit	
Attorney Docket No.	02/041 VAT

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None

Deposit Account

Deposit Account Number	50-2193
Deposit Account Name	ProPat, L.L.C.

The Commissioner is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1001	750	2001	375
1002	330	2002	165
1003	520	2003	260
1004	750	2004	375
1005	160	2005	80
SUBTOTAL (1)		(\$)	750.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
10	-20** =	0 X	= -0-
1	- 3*** =	X	= -0-
Multiple Dependent			

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1202	18	2202	9
1201	84	2201	42
1203	280	2203	140
1204	84	2204	42
1205	18	2205	9
SUBTOTAL (2)		(\$)	-0-

** or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee	Fee	Fee	Fee	Fee Paid
1051	130	2051	65	Surcharge – late filing fee or oath
1051	50	2052	25	Surcharge – late provisional filing fee or cover sheet
1053	130	1053	130	Non-English specification
1812	2,520	1812	2,520	For filing a request for ex parte reexamination
1804	920	1804	920	Requesting publication of SIR prior to Examiner action
1805	1,840	1805	1,840	Requesting publication of SIR after Examiner action
1251	110	1251	55	Extension for reply within first month
1252	410	1252	205	Extension for reply within second month
1253	930	1253	465	Extension for reply within third month
1254	1,450	1254	725	Extension for reply within fourth month
1255	1,970	1255	985	Extension for reply within fifth month
1401	320	1401	160	Notice of Appeal
1402	320	1402	160	Filing a brief in support of an appeal
1403	280	1403	140	Request for oral hearing
1451	1,510	1451	1,510	Petition to institute a public use proceeding
1452	110	2452	55	Petition to revive – unavoidable
1453	1,300	2453	650	Petition to revive – unintentional
1501	1,300	2501	650	Utility issue fee (or reissue)
1502	470	2502	235	Design issue fee
1503	630	2503	315	Plant issue fee
1460	130	1460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1806	180	1806	180	Submission of Information Disclosure Stmt
8021	40	8021	40	Recording each patent assignment per property (times number of properties)
1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))
1801	750	2801	375	Request for Continued Examination (RCE)
1802	900	1802	900	Request for expedited examination of a design application

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$)

40.00

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Klaus Schweitzer	Registration No. (Attorney/Agent)	Limited Recognition	Telephone
Signature	<i>K. Schweitzer</i>			Date July 14, 2003

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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